

**ACORD. CERTIFICATE OF INSURANCE**

ISSUE DATE (MM/DD/YY)

## PRODUCER

Meeker Sharkey & MacBean  
21 Commerce Drive  
Cranford, NJ 07016  
908-272-8100

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND  
CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE  
DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE  
POLICIES BELOW.

## COMPANIES AFFORDING COVERAGE

COMPANY  
LETTER A

St. Paul Fire &amp; Marine

COMPANY  
LETTER BCOMPANY  
LETTER CCOMPANY  
LETTER DCOMPANY  
LETTER E

## INSURED

Sac. Hill 2 University Hts. III  
c/o Eastern Community Mgmt  
225 Highway 35  
Red Bank  
NJ 07701

## COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD  
INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS  
CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,  
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| CO<br>LTR | TYPE OF INSURANCE  | POLICY NUMBER | POLICY EFFECTIVE<br>DATE (MM/DD/YY) | POLICY EXPIRATION<br>DATE (MM/DD/YY) | LIMITS                                |
|-----------|--|---------------|-------------------------------------|--------------------------------------|---------------------------------------|
| A         | GENERAL LIABILITY  | BINDER        | 1/01/93                             | 1/01/94                              | GENERAL AGGREGATE \$ 2000000          |
|           | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY               |               |                                     |                                      | PRODUCTS-COMP/OP AGG. \$ 1000000      |
|           | <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR |               |                                     |                                      | PERSONAL & ADV. INJURY \$ 1000000     |
|           | <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.                          |               |                                     |                                      | EACH OCCURRENCE \$ 1000000            |
|           |  |               |                                     |                                      | FIRE DAMAGE (Any one fire) \$ 50000   |
|           |  |               |                                     |                                      | MED. EXPENSE (Any one person) \$ 5000 |
|           | AUTOMOBILE LIABILITY   |               |                                     |                                      | COMBINED SINGLE LIMIT \$              |
|           | <input type="checkbox"/> ANY AUTO  |               |                                     |                                      | BODILY INJURY (Per person) \$         |
|           | <input type="checkbox"/> ALL OWNED AUTOS                                       |               |                                     |                                      | BODILY INJURY (Per accident) \$       |
|           | <input type="checkbox"/> SCHEDULED AUTOS                                       |               |                                     |                                      | PROPERTY DAMAGE \$                    |
|           | <input type="checkbox"/> HIRED AUTOS   |               |                                     |                                      |                                       |
|           | <input type="checkbox"/> NON-OWNED AUTOS                                       |               |                                     |                                      |                                       |
|           | <input type="checkbox"/> GARAGE LIABILITY                                      |               |                                     |                                      |                                       |
|           | EXCESS LIABILITY   |               |                                     |                                      | EACH OCCURRENCE \$                    |
|           | <input type="checkbox"/> UMBRELLA FORM   |               |                                     |                                      | AGGREGATE \$                          |
|           | <input type="checkbox"/> OTHER THAN UMBRELLA FORM                              |               |                                     |                                      |                                       |
|           | WORKER'S COMPENSATION<br>AND<br>EMPLOYERS' LIABILITY                           |               |                                     |                                      | STATUTORY LIMITS                      |
|           |  |               |                                     |                                      | EACH ACCIDENT \$                      |
|           |  |               |                                     |                                      | DISEASE-POLICY LIMIT \$               |
|           |  |               |                                     |                                      | DISEASE-EACH EMPLOYEE \$              |
| A         | Blanket Building & Contents  | BINDER        | 1/01/93                             | 1/01/94                              | \$11,034,430.                         |

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

OWNER: ALAN H. CROCK, UNMARRIED AND CHERO HALL, UNMARRIED

Fidelity Limit \$100,000.

LOC: 50 CORNERSTONE LANE, NEWARK, NJ 07103 (21G) LOT: 21.07 BLOCK: 406

KH0V033191

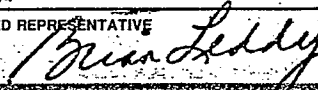
## CERTIFICATE HOLDER

K. HOVNANIAN MORTGAGE, INC.  
THEIR SUCCESSORS AND/OR ASSIGNS  
AS THEIR INTEREST MAY APPEAR  
ONE INDUSTRIAL WAY WEST, BLDG. D  
EATONTOWN, NJ 07724

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE  
EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO  
MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE  
LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR  
LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



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